			Application or Docket Number										
	PATENT APPLICATION FEE DETERMINATION RECORD												
Effective October 1, 2003									1077071				
CLAIMS AS FILED - PART I								SMALL E	NTITY		OTHER	THAN	
			(Column	(Column 1) (Colum				TYPE [\Rightarrow	OR	SMALL	ENTITY	
TOTAL CLAIMS			9.2					RATE	FEE]	RATE	FEE	
FOR			NUMBER FILED		NUMB	ER EXTRA		BASIC FEE	385.00	OR	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS			1 minus 20=		•			X\$ 9=		OR	X\$18=		
INE	EPENDENT CL	AIMS	5 minus 3 =		-2			X43=		OR	X86=	177	
MU	ILTIPLE DEPEN	IDENT CLAIM PI	RESENT	······································				+145=		OR	+290=		
* If the difference in column 1 is less than zero, enter "0" in column 2								TOTAL		OR	TOTAL	947	
CLAIMS AS AMENDED - PART II Z-18-(($\langle \rho \rangle$		•	OTHER	1	
(Column 1)			(Column 2)			(Column 3)		SMALL	ENTITY	OR	SMALL	ENTITY	
AMENDMENT A		CLAIMS REMAINING		HIGH NUME		PRESENT			ADDI-		DATE	ADDI-	
		AFTER AMENDMENT		PREVIC PAID I		EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE	
	Total	·H)	Minus	7)		-	†	X\$ 9=		OR	X\$18=		
	Independent	.15	Minus	F)	=]	X43=		OR	X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT			CLAIM		1	4.45			+290=			
	·							+145=		OR	TOTAL		
								TOTAL ADDIT. FEE		OR	ADDIT. FEE		
		(Column 1)		(Colun		(Column 3)					_		
AMENDMENT B		CLAIMS REMAINING		HIGH		PRESENT	lſ		ADDI-			ADDI-	
		AFTER AMENDMENT		PREVIO		EXTRA		RATE	TIONAL		RATE	TIONAL FEE	
	Total	AMENDMENT	Minus	++	-OR		1 1	X\$ 9=	, <u>, , , , , , , , , , , , , , , , , , </u>		X\$18=	1,00	
	Independent		Minus	***		-	1			OR			
A	•	NTATION OF MU			CLAIM		1	X43=		OR	X86=		
	rinorricos	THAT TO THE		CIVELIVI			.	+145=		OR	+290=		
TOTAL										OR	TOTAL ADDIT, FEE		
(Column 1) (Column 2) (Column 3)								ADDIT. FEE	B		ADDII. FEE		
		(Column 1) CLAIMS		I ADDI	١.		ADDI-						
) L	·	REMAINING AFTER		NUMI PREVIO		PRESENT EXTRA		RATE	ADDI- TIONAL		RATE	TIONAL	
EN		AMENDMENT		PAID		L. CANTA	11		FEE			FEE	
AMENDMENT C	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
S S	Independent	*	Minus	***		<u> </u>] [X43=		OR	X86=		
	FIRST PRESE	NTATION OF ML	JLTIPLE DEF	PENDENT	CLAIM		J		-				
										OR	+290=		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."													
****	If the "Highest Nu The "Highest Num	mber Previously Pa ber Previously Pai	aid For" IN THI d For" (Total or	S SPACE is Independe	s less tha ent) is the	n 3, enter "3." highest numbe				k in co	lumn 1.	İ	

FORM PTO-875 (Rev 10/03)

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